

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number

5382

First Named Inventor

Jianrong Deng

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

A COLLAPSIBLE CANOPY

(Title of the Invention)

the specification of which

 is attached hereto

OR
 was filed on (MM/DD/YYYY)

02/09/2002

as United States Application Number or PCT International

Application Number **PCT/CN02/00076** and was amended on (MM/DD/YYYY) **[redacted]** (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			YES	NO
PCT/CN02/00076	P.R.China	02/09/2002	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

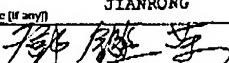
[Page 1 of 2]

PTO/SB/13 (04-01)

Approved for use through 10/31/2002. GPO: 2001-2003

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number _____ or Mail Code: _____		<input type="checkbox"/> Correspondence address below						
<p>Name: Charles I. Brodsky, Esq.</p> <p>Address:</p> <table border="1"> <tr> <td>City: Marlboro</td> <td>State: NJ</td> <td>Zip: 07746</td> </tr> <tr> <td>Country: USA</td> <td>Telephone: 732-431-1333</td> <td>Fax: 732-303-0626</td> </tr> </table>			City: Marlboro	State: NJ	Zip: 07746	Country: USA	Telephone: 732-431-1333	Fax: 732-303-0626
City: Marlboro	State: NJ	Zip: 07746						
Country: USA	Telephone: 732-431-1333	Fax: 732-303-0626						
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that such false statements and the so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the specification or any patent issued thereon.</p>								
<p>NAME OF SOLE OR FIRST INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor</p>								
<p>Given Name (First and middle [if any]): JIANRONG</p> <p>Inventor's Signature: </p>		<p>Family Name or Surname: DENG</p> <p>Date: July 31, 2003</p>						
<p>Residence: City Nanhai City</p>		<p>Province: Guangdong</p> <p>P.R. China</p> <p>Country: P.R. China</p> <p>Citizenship: P.R. China</p>						
<p>Mailing Address: Bihuge Xingcheng Shaminan Huangqi Dist.</p>								
<p>City: Nanhai City</p>		<p>State Prov.: Guangdong</p> <p>ZIP: 528248</p> <p>Country: P.R. China</p>						
<p>NAME OF SECOND INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor</p>								
<p>Given Name (First and middle [if any])</p> <p>Inventor's Signature</p>		<p>Family Name or Surname</p> <p>Date</p>						
<p>Residence: City</p>								
<p>City</p>		<p>State</p> <p>ZIP</p> <p>Country</p>						
<p>Mailing Address</p>								
<p><input type="checkbox"/> Additional inventors are being named on the: _____</p>								
<p>Supplemental Additional Inventor(s) whose(s) PTO/SB/02A attached hereto.</p>								

(Page 2 of 2)

Please type a plus sign (+) inside this box →

#FORMS1 (02-01)

Approved for use through 10/31/2002. OMB 0610-0008

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	
Application Number	
Filing Date	
First Named Inventor	Jianrong Dang
Title	A Collapsible Canopy
Group Art Unit	Field Art Test
Examiner Name	
Attorney Docket Number	S 382

I hereby appoint:

 Practitioners at Customer Number

OR

 Practitioner(s) named below:

Name	Registration Number
CHARLES I. BRODSKY, Esq.	22,058

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

 The above-mentioned Customer Number,

OR

 Practitioners at Customer Number

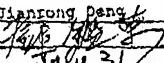
OR

 Firm or Individual Name Address Address City State Zip County Telephone Fax

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/05).

SIGNATURE of Applicant or Assignee of Record

Name Jianrong DangSignature Date July 31, 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representatives(s) are required. Submit mailing items with more than one signature in separate (one original) form.

 Total of items are submitted.

Each item must be signed by an individual who is authorized to do so. Transmissions accepted via facsimile or e-mail are not valid unless they are accompanied by a signed original or copy. Please mail or fax to the U.S. Patent and Trademark Office, Washington, DC 20591. DO NOT SEND TELLS OR COMMERCIAL FAXES TO THIS NUMBER. E-MAIL TO: AttorneysCommissioner@uspto.gov, Washington, DC 20591.